

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Arizona Republican Party

ADDRESS (number and street)

3501 North 24th Street

☐Check if different
than previously
reported. (ACC)

Phoenix

AZ

85016

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00008227

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

09

01

2009

through

09

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Timothy Lee

Signature of Treasurer

Electronically Filed by Timothy Lee

Date

11

17

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 40

Write or Type Committee Name
Arizona Republican Party

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		
2009		30370.59
(b) Cash on Hand at Beginning of Reporting Period	53636.71	
(c) Total Receipts (from Line 19)	31085.88	353062.30
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	84722.59	383432.89
7. Total Disbursements (from Line 31)	44219.58	342929.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40503.01	40503.01
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 40

Write or Type Committee Name
Arizona Republican Party

Report Covering the Period:

From:

M M D D Y Y W Y
0 9 0 1 2 0 0 9

To:

M M D D Y Y W Y
0 9 3 0 2 0 0 9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7725.00	130131.78
(ii) Unitemized	9349.10	185031.19
(iii) TOTAL (add Lines 11(a)(i) and (ii)	17074.10	315162.97
(b) Political Party Committees	0.00	0.88
(c) Other Political Committees (such as PACs)	0.00	25.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17074.10	315188.85
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	4960.15
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	-15.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	6073.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	14011.78	26855.30
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	14011.78	26855.30
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	31085.88	353062.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17074.10	326207.00

DETAILED SUMMARY PAGE

of Disbursements

4 / 40

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	2476.21	16294.65	
(ii) Non-Federal Share.....	6367.40	53865.51	
(b) Other Federal Operating Expenditures.....	26727.59	185661.43	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	35571.20	255821.59	
22. Transfers to Affiliated/Other Party Committees.....	0.00	7043.52	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	3500.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	8648.38	76564.77	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	8648.38	76564.77	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	44219.58	342929.88	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37852.18	289064.37	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 40

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17074.10	315188.85
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17074.10	315188.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	29203.80	201956.08
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	4960.15
38. Net Operating Expenditures (subtract Line 37 from Line 36)	29203.80	196995.93

SCHEDULE L (FEC Form 3X)

6 / 40

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Arizona Republican Party		
NAME OF ACCOUNT LEVIN ACCO		

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	2000.00
c. Total.....	0.00	2000.00
2. OTHER RECEIPTS.....	0.00	2343.52
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	4343.52
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	8439.33
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	8439.33
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	4483.52	8579.33
8. RECEIPTS..... (from Line 3)	0.00	4343.52
9. SUBTOTAL..... (Add Lines 7 and 8)	4483.52	12922.85
10. DISBURSEMENTS..... (From Line 6)	0.00	8439.33
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	4483.52	4483.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Gregory Blank

Mailing Address 20368 N. 93rd Pl.

City

Scottsdale

State

AZ

Zip Code

85255-6619

FEC ID number of contributing
federal political committee.

C

Name of Employer
Summit Holdings, Inc.

Occupation
Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 5 / 2 0 0 9

Transaction ID: 91019.C88573

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Robert Boschi

Mailing Address 2039 Leisure World

City

Mesa

State

AZ

Zip Code

85206-5332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 2 / 2 0 0 9

Transaction ID: 90917.C88363

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lee Bowman

Mailing Address 10040 E Happy Valley Rd No 439

City

Scottsdale

State

AZ

Zip Code

85255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 5 / 2 0 0 9

Transaction ID: 91019.C88562

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Joseph Brendel

Mailing Address 209 N Val Vista

City

Apache Junction

State

AZ

Zip Code

85219-8854

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 1 / 2 0 0 9

Transaction ID: 90917.C88320

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Connie Combs

Mailing Address 3132 E Meadowbrook Ave

City

Phoenix

State

AZ

Zip Code

85016-5060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 5 / 2 0 0 9

Transaction ID: 91019.C88564

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Thomas Creager

Mailing Address 3181 W Stephens Pl

City

Chandler

State

AZ

Zip Code

85226-3141

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arizona State Veteran Home

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 1 / 2 0 0 9

Transaction ID: 90917.C88316

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Joan Ellinwood

Mailing Address PO Box 1445

City

Tubac

State

AZ

Zip Code

85646-1445

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 9

Transaction ID: 91019.C88600

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jerome Harden

Mailing Address 5515 E Cannon Dr

City

Scottsdale

State

AZ

Zip Code

85253-1158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 9 / 2 0 0 9

Transaction ID: 90917.C88510

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Hellene Henrikson

Mailing Address 5226 N Via Agrifoglio

City

Tucson

State

AZ

Zip Code

85750-6039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 9 / 2 0 0 9

Transaction ID: 90917.C88469

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Robert Lee

Mailing Address 6548 E Santa Elena
P.O. Box 400341

City State Zip Code
Tucson AZ 85715-4775

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 1 / 2 0 0 9

Transaction ID: 90917.C88332

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Mangum

Mailing Address 2218 Encanto Dr NE

City State Zip Code
Phoenix AZ 85007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 9

Transaction ID: 91019.C88651

Amount of Each Receipt this Period

300.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Paul Messinger

Mailing Address 11060 N 94th St

City State Zip Code
Scottsdale AZ 85260-6716

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 9

Transaction ID: 91019.C88569

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Tohono Nation

Mailing Address PO Box 837

City

State

Zip Code

Sells

AZ

85634

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 6 / 2 0 0 9

Transaction ID: 91019.C88636

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Robert Niles

Mailing Address 35 W. Brown Rd., Apt. 325

City

State

Zip Code

Mesa

AZ

85201-3492

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 2 / 2 0 0 9

Transaction ID: 90917.C88376

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Velma Renegar

Mailing Address 35 W. Brown Rd., Apt. 313

City

State

Zip Code

Mesa

AZ

85201-2823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 2 / 2 0 0 9

Transaction ID: 90917.C88365

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Chris Ruhl

Mailing Address 945 N La Salle Ave

City

Tucson

State

AZ

Zip Code

85748

FEC ID number of contributing
federal political committee.

C

Name of Employer
IBM Corp

Occupation

Software Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 2 / 2 0 0 9

Transaction ID: 91019.C88635

Amount of Each Receipt this Period

25.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Shellie Simler

Mailing Address 10619 N. La Quinta Dr.

City

Oro Valley

State

AZ

Zip Code

85737-7017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aerojet

Occupation

Business Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 2 / 2 0 0 9

Transaction ID: 91019.C88624

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Melinda Swanson

Mailing Address 10885 N 78th St

City

Scottsdale

State

AZ

Zip Code

85260-5587

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 2 / 2 0 0 9

Transaction ID: 90917.C88369

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Evelyn Timmons

Mailing Address PO Box 1389

City

Scottsdale

State

AZ

Zip Code

85252-1389

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 2 / 2 0 0 9

Transaction ID: 90917.C88360

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Stanley Zeitz

Mailing Address 20564 N Bailey Ct

City

Surprise

State

AZ

Zip Code

85387-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 2 / 2 0 0 9

Transaction ID: 90917.C88372

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

7725.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: 91019.E10359 Date of Disbursement																				
Mailing Address 5021 N 20th St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	5		2	0	0	9												
City Phoenix State AZ Zip Code 85016-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage for thank you letters Candidate Name	<table border="1"> <tr> <td colspan="10">67.49</td> </tr> </table>	67.49																			
67.49																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
POSTAGE FOR THANK YOU LETTERS																					
B. Full Name (Last, First, Middle Initial) Auto Owners	Transaction ID: 91019.E10326 Date of Disbursement																				
Mailing Address P.O. Box 30078	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	2		2	0	0	9												
City Lansing State MI Zip Code 48909-75	Amount of Each Disbursement this Period																				
Purpose of Disbursement Liability insurance Candidate Name	<table border="1"> <tr> <td colspan="10">585.69</td> </tr> </table>	585.69																			
585.69																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
LIABILITY INSURANCE																					
C. Full Name (Last, First, Middle Initial) Southwest Publishing And Mailing Corp.	Transaction ID: 91019.E10353 Date of Disbursement																				
Mailing Address 2600 NW Topeka Ave.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	9												
City Topeka State KS Zip Code 66617-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Party direct mail Candidate Name	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
PARTY DIRECT MAIL																					

SUBTOTAL of Disbursements This Page (optional)

3653.18

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)
Julee Dawson

Mailing Address 1802 S Palm Springs Circle

City Tucson State AZ Zip Code 85710-

Purpose of Disbursement
Reimbursement for travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10340

Date of Disbursement

/ /

Amount of Each Disbursement this Period

272.21

REIMBURSEMENT FOR TRAVEL

B.

Full Name (Last, First, Middle Initial)
Julee Dawson

Mailing Address 1802 S Palm Springs Circle

City Tucson State AZ Zip Code 85710-

Purpose of Disbursement
Reimbursement for travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10341

Date of Disbursement

/ /

Amount of Each Disbursement this Period

310.77

REIMBURSEMENT FOR TRAVEL

C.

Full Name (Last, First, Middle Initial)
Double Consulting

Mailing Address e7739 E Broadway, Suite 63

City Tucson State AZ Zip Code 85710-

Purpose of Disbursement
Party consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10339

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

PARTY CONSULTING

SUBTOTAL of Disbursements This Page (optional)

3582.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 40

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
 Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Carolyn Leff Mailing Address 3501 N 24th Street	Transaction ID: 91019.E10334 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div>
City Phoenix State AZ Zip Code 85016- Purpose of Disbursement Reimbursement for supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>65.91</div> REIMBURSEMENT FOR SUPPLIES
B. Full Name (Last, First, Middle Initial) Carolyn Leff Mailing Address 3501 N 24th Street City Phoenix State AZ Zip Code 85016- Purpose of Disbursement Reimbursement for supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91019.E10333 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>37.24</div> REIMBURSEMENT FOR SUPPLIES
C. Full Name (Last, First, Middle Initial) Carolyn Leff Mailing Address 3501 N 24th Street City Phoenix State AZ Zip Code 85016- Purpose of Disbursement Reimbursement for supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91019.E10335 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>115.06</div> REIMBURSEMENT FOR SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

218.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) M & I Thunderbird Bank Mailing Address 1 E Camelback Rd	Transaction ID: 91019.E10344 Date of Disbursement <div> <div>09</div> <div>01</div> <div>2009</div> </div>
City Phoenix State AZ Zip Code 85012-3224 Purpose of Disbursement Credit card payment see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1492.26</div> CREDIT CARD PAYMENT SEE BELOW
B. Full Name (Last, First, Middle Initial) US Airways Mailing Address via internet City State Zip Code Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91020.E10400 Date of Disbursement <div> <div>08</div> <div>01</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>977.49</div> [MEMO ITEM] MEMO: TRAVEL
C. Full Name (Last, First, Middle Initial) M & I Thunderbird Bank Mailing Address 1 E Camelback Rd City Phoenix State AZ Zip Code 85012-3224 Purpose of Disbursement Credit card payment see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10343 Date of Disbursement <div> <div>09</div> <div>01</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>506.18</div> CREDIT CARD PAYMENT SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ►

1998.44

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Hilton Garden Inn

Mailing Address 411 Minnesota Ave

City State Zip Code
Saint Paul MN 55101-1703

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 91019.E10377

Date of Disbursement

/ /

Amount of Each Disbursement this Period

401.39

[MEMO ITEM]

MEMO: TRAVEL

B.

Full Name (Last, First, Middle Initial)

M & I Thunderbird Bank

Mailing Address 1 E Camelback Rd

City State Zip Code
Phoenix AZ 85012-3224

Purpose of Disbursement
Bank service charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 91019.E10370

Date of Disbursement

/ /

Amount of Each Disbursement this Period

144.94

BANK SERVICE CHARGES

C.

Full Name (Last, First, Middle Initial)

M & I Thunderbird Bank

Mailing Address 1 E Camelback Rd

City State Zip Code
Phoenix AZ 85012-3224

Purpose of Disbursement
Bank service charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 91019.E10371

Date of Disbursement

/ /

Amount of Each Disbursement this Period

116.03

BANK SERVICE CHARGES

SUBTOTAL of Disbursements This Page (optional)

260.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) M & I Thunderbird Bank Mailing Address 1 E Camelback Rd	Transaction ID: 91019.E10345 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div> </div>
City Phoenix State AZ Zip Code 85012-3224 Purpose of Disbursement Reimbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>500.00</div> REIMBURSEMENT SEE BELOW
B. Full Name (Last, First, Middle Initial) Aristotle International, Inc. Mailing Address 205 Pennsylvania Avenue, NE City Washington State DC Zip Code 20003- Purpose of Disbursement FEC Reporting software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10378 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>500.00</div> [MEMO ITEM] MEMO: FEC REPORTING SOFTWARE
C. Full Name (Last, First, Middle Initial) Teresa Martinez Mailing Address 3501 N 24th Street City Phoenix State AZ Zip Code 85016- Purpose of Disbursement Reimbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10356 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>141.24</div> REIMBURSEMENT SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

641.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO Box 9622

City Mission Hi State CA Zip Code 91346-96

Purpose of Disbursement
Cell phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 91019.E10380

Date of Disbursement

08 / 01 / 2009

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

MEMO: CELL PHONE

B.

Full Name (Last, First, Middle Initial)
Teresa Martinez

Mailing Address 3501 N 24th Street

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement
Reimbursement see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 91019.E10357

Date of Disbursement

09 / 01 / 2009

Amount of Each Disbursement this Period

160.00

REIMBURSEMENT SEE BELOW

C.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO Box 9622

City Mission Hi State CA Zip Code 91346-96

Purpose of Disbursement
Cell phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 91019.E10381

Date of Disbursement

09 / 01 / 2009

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

MEMO: CELL PHONE

SUBTOTAL of Disbursements This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Teresa Martinez	Transaction ID: 91019.E10358 Date of Disbursement																				
Mailing Address 3501 N 24th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	9												
City Phoenix State AZ Zip Code 85016-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement see below	<table border="1"> <tr> <td>2</td><td>4</td><td>9</td><td>.</td><td>2</td><td>4</td> </tr> </table>	2	4	9	.	2	4														
2	4	9	.	2	4																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
REIMBURSEMENT SEE BELOW																					
B. Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 91019.E10382 Date of Disbursement																				
Mailing Address PO Box 9622	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	9												
City Mission Hi State CA Zip Code 91346-96	Amount of Each Disbursement this Period																				
Purpose of Disbursement Cell phone	<table border="1"> <tr> <td>1</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	1	0	0	.	0	0														
1	0	0	.	0	0																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: CELL PHONE																					
C. Full Name (Last, First, Middle Initial) Brett Mecum	Transaction ID: 91019.E10362 Date of Disbursement																				
Mailing Address 2936 W Gregg Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	0	9												
City Chandler State AZ Zip Code 85224-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement see below	<table border="1"> <tr> <td>1</td><td>5</td><td>0</td><td>5</td><td>.</td><td>3</td><td>6</td> </tr> </table>	1	5	0	5	.	3	6													
1	5	0	5	.	3	6															
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
REIMBURSEMENT SEE BELOW																					

SUBTOTAL of Disbursements This Page (optional)

1754.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Grand Hyatt	Transaction ID: 91019.E10383 Date of Disbursement																				
Mailing Address One Market Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	0	9												
City San Diego State CA Zip Code 92101-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td colspan="10">1032.57</td> </tr> </table>	1032.57																			
1032.57																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: TRAVEL																					
B. Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 91019.E10384 Date of Disbursement																				
Mailing Address PO Box 9622	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	9												
City Mission Hi State CA Zip Code 91346-96	Amount of Each Disbursement this Period																				
Purpose of Disbursement Cell phone	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM] MEMO: CELL PHONE																					
C. Full Name (Last, First, Middle Initial) Brett Mecum	Transaction ID: 91019.E10363 Date of Disbursement																				
Mailing Address 2936 W Gregg Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	0	9												
City Chandler State AZ Zip Code 85224-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement see below	<table border="1"> <tr> <td colspan="10">408.86</td> </tr> </table>	408.86																			
408.86																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
REIMBURSEMENT SEE BELOW																					

SUBTOTAL of Disbursements This Page (optional)

408.86

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622	Transaction ID: 91019.E10385 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div>
City Mission Hi State CA Zip Code 91346-96 Purpose of Disbursement Cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>100.00</div> [MEMO ITEM] MEMO: CELL PHONE
B. Full Name (Last, First, Middle Initial) Brett Mecum Mailing Address 2936 W Gregg Dr City Chandler State AZ Zip Code 85224- Purpose of Disbursement Reimbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10364 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>819.34</div> REIMBURSEMENT SEE BELOW
C. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622 City Mission Hi State CA Zip Code 91346-96 Purpose of Disbursement Cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10386 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>100.00</div> [MEMO ITEM] MEMO: CELL PHONE

SUBTOTAL of Disbursements This Page (optional) ►

819.34

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 40

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
 Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Matthew Roberts	Transaction ID: 91019.E10366 Date of Disbursement
Mailing Address 3501 N 24th Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div>
City Phoenix State AZ Zip Code 85016- Purpose of Disbursement Reimbursement see below Candidate Name	Amount of Each Disbursement this Period <div>211.72</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> REIMBURSEMENT SEE BELOW
B. Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 91019.E10388 Date of Disbursement
Mailing Address PO Box 9622	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div>
City Mission Hi State CA Zip Code 91346-96 Purpose of Disbursement Cell phone Candidate Name	Amount of Each Disbursement this Period <div>100.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> [MEMO ITEM] MEMO: CELL PHONE
C. Full Name (Last, First, Middle Initial) Matthew Roberts	Transaction ID: 91019.E10365 Date of Disbursement
Mailing Address 3501 N 24th Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div>
City Phoenix State AZ Zip Code 85016- Purpose of Disbursement Reimbursement see below Candidate Name	Amount of Each Disbursement this Period <div>100.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> REIMBURSEMENT SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

311.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622	Transaction ID: 91019.E10387 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 1 / 2 0 0 9</div> </div>
City Mission Hi State CA Zip Code 91346-96 Purpose of Disbursement Cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>100.00</div> [MEMO ITEM] MEMO: CELL PHONE
B. Full Name (Last, First, Middle Initial) Michelle Schmitt Mailing Address 3501 North 24th Street City Phoenix State AZ Zip Code 85016- Purpose of Disbursement Reimbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10368 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>96.07</div> REIMBURSEMENT SEE BELOW
C. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622 City Mission Hi State CA Zip Code 91346-96 Purpose of Disbursement Cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10390 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>49.52</div> [MEMO ITEM] MEMO: CELL PHONE

SUBTOTAL of Disbursements This Page (optional) ►

96.07

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Michelle Schmitt	Transaction ID: 91019.E10367 Date of Disbursement																				
Mailing Address 3501 North 24th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	0	9												
City Phoenix State AZ Zip Code 85016-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement see below	<table border="1"> <tr> <td colspan="10">597.05</td> </tr> </table>	597.05																			
597.05																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	REIMBURSEMENT SEE BELOW																				
B. Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 91019.E10389 Date of Disbursement																				
Mailing Address PO Box 9622	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	9												
City Mission Hi State CA Zip Code 91346-96	Amount of Each Disbursement this Period																				
Purpose of Disbursement Cell phone	<table border="1"> <tr> <td colspan="10">74.44</td> </tr> </table>	74.44																			
74.44																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	[MEMO ITEM] MEMO: CELL PHONE																				
C. Full Name (Last, First, Middle Initial) Michelle Schmitt	Transaction ID: 91019.E10369 Date of Disbursement																				
Mailing Address 3501 North 24th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	9												
City Phoenix State AZ Zip Code 85016-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimbursement see below	<table border="1"> <tr> <td colspan="10">488.13</td> </tr> </table>	488.13																			
488.13																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	REIMBURSEMENT SEE BELOW																				

SUBTOTAL of Disbursements This Page (optional)

1085.18

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622	Transaction ID: 91019.E10391 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div> </div>
City Mission Hi State CA Zip Code 91346-96 Purpose of Disbursement Cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>100.00</div> [MEMO ITEM] MEMO: CELL PHONE
B. Full Name (Last, First, Middle Initial) Sharenet Communications Company Mailing Address PO Box 14349 City Phoenix State AZ Zip Code 85063- Purpose of Disbursement Office telecommunications Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10350 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>843.82</div> OFFICE TELECOMMUNICATIONS
C. Full Name (Last, First, Middle Initial) Sharenet Communications Company Mailing Address PO Box 14349 City Phoenix State AZ Zip Code 85063- Purpose of Disbursement Office telecommunications Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10351 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 2 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>535.62</div> OFFICE TELECOMMUNICATIONS

SUBTOTAL of Disbursements This Page (optional)

1379.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Colin Shipley

Mailing Address 3501 N. 24th Street

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement
Reimbursement see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10337

Date of Disbursement

09 / 01 / 2009

Amount of Each Disbursement this Period

100.00

REIMBURSEMENT SEE BELOW

B.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 9622

City Mission Hi State CA Zip Code 91346-96

Purpose of Disbursement
Cell phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10374

Date of Disbursement

08 / 01 / 2009

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

MEMO: CELL PHONE

C.

Full Name (Last, First, Middle Initial)

Colin Shipley

Mailing Address 3501 N. 24th Street

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement
Reimbursement see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10336

Date of Disbursement

09 / 01 / 2009

Amount of Each Disbursement this Period

209.38

REIMBURSEMENT SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

309.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Hilton Garden Inn Mailing Address 411 Minnesota Ave	Transaction ID: 91019.E10372 Date of Disbursement <div> <div>08</div> <div>20</div> <div>2009</div> </div>
City Saint Paul State MN Zip Code 55101-1703 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>103.88</div> [MEMO ITEM] MEMO: TRAVEL
B. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622 City Mission Hi State CA Zip Code 91346-96 Purpose of Disbursement Cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10373 Date of Disbursement <div> <div>09</div> <div>01</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>100.00</div> [MEMO ITEM] MEMO: CELL PHONE
C. Full Name (Last, First, Middle Initial) Colin Shipley Mailing Address 3501 N. 24th Street City Phoenix State AZ Zip Code 85016- Purpose of Disbursement Reimbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10338 Date of Disbursement <div> <div>09</div> <div>30</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>156.68</div> REIMBURSEMENT SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

156.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 9622	Transaction ID: 91019.E10375 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div> </div>
City Mission Hi State CA Zip Code 91346-96 Purpose of Disbursement Cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>100.00</div> [MEMO ITEM] MEMO: CELL PHONE
B. Full Name (Last, First, Middle Initial) SRP Mailing Address P.O. Box 2950 City Phoenix State AZ Zip Code 85062-29 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10354 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>1228.81</div> UTILITIES
C. Full Name (Last, First, Middle Initial) Strategic Fundraising, Inc. Mailing Address 7591 9th Street North City Saint Paul State MN Zip Code 55128- Purpose of Disbursement Party telemarketing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10355 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 2 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>7553.00</div> PARTY TELEMARKETING

SUBTOTAL of Disbursements This Page (optional)

8781.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Linda White

Mailing Address 3501 N 24th Street

City
Phoenix

State
AZ

Zip Code
85016-

Purpose of Disbursement
Reimbursement see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10342

Date of Disbursement

/ /

Amount of Each Disbursement this Period

231.92

REIMBURSEMENT SEE BELOW

B.

Full Name (Last, First, Middle Initial)

U.S. Postmaster

Mailing Address 5021 N 20th St.

City
Phoenix

State
AZ

Zip Code
85016-

Purpose of Disbursement
Permit and postage for party

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10376

Date of Disbursement

/ /

Amount of Each Disbursement this Period

204.00

[MEMO ITEM]

MEMO: PERMIT AND POSTAGE
FOR PARTY

SUBTOTAL of Disbursements This Page (optional)

231.92

TOTAL This Period (last page this line number only)

26727.59

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 / 40

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
 Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Vision Service Plan Mailing Address P.O. Box 6000	Transaction ID: 91019.E10360 Date of Disbursement <div> <div>09</div> <div>01</div> <div>2009</div> </div>
City San Franci State CA Zip Code 94160-32 Purpose of Disbursement Employee vision insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>21.50</div> EMPLOYEE VISION INSURANCE
B. Full Name (Last, First, Middle Initial) Vision Service Plan Mailing Address P.O. Box 6000 City San Franci State CA Zip Code 94160-32 Purpose of Disbursement Employee vision insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10361 Date of Disbursement <div> <div>09</div> <div>22</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>21.50</div> EMPLOYEE VISION INSURANCE
C. Full Name (Last, First, Middle Initial) Aetna Mailing Address 7720 N. 16th Street, #400 City Phoenix State AZ Zip Code 85020- Purpose of Disbursement Employee benefits Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10324 Date of Disbursement <div> <div>09</div> <div>01</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>514.80</div> EMPLOYEE BENEFITS

SUBTOTAL of Disbursements This Page (optional)

557.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Aetna Mailing Address 7720 N. 16th Street, #400	Transaction ID: 91019.E10325 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	9												
City Phoenix State AZ Zip Code 85020- Purpose of Disbursement Employee benefits Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 514.80 EMPLOYEE BENEFITS																				
B. Full Name (Last, First, Middle Initial) BMS Payroll Mailing Address 18441 N. 25th Ave Suite 103 City Phoenix State AZ Zip Code 85023- Purpose of Disbursement Payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10329 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period 1234.68 PAYROLL TAXES	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	9												
C. Full Name (Last, First, Middle Initial) BMS Payroll Mailing Address 18441 N. 25th Ave Suite 103 City Phoenix State AZ Zip Code 85023- Purpose of Disbursement Payroll fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E10330 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period 61.25 PAYROLL FEES	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	9												

SUBTOTAL of Disbursements This Page (optional)

1810.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Arizona Republican Party

<p>A.</p> <p>Full Name (Last, First, Middle Initial) BMS Payroll</p> <p>Mailing Address 18441 N. 25th Ave Suite 103</p> <p>City Phoenix State AZ Zip Code 85023-</p> <p>Purpose of Disbursement Payroll processing fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91019.E10332 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div></p> <p>Amount of Each Disbursement this Period <div>58.75</div></p> <p>PAYROLL PROCESSING FEES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) BMS Payroll</p> <p>Mailing Address 18441 N. 25th Ave Suite 103</p> <p>City Phoenix State AZ Zip Code 85023-</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91019.E10331 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div></p> <p>Amount of Each Disbursement this Period <div>1234.62</div></p> <p>PAYROLL TAXES</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Brett Mecum</p> <p>Mailing Address 2936 W Gregg Dr</p> <p>City Chandler State AZ Zip Code 85224-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91019.E10392 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 9</div></p> <p>Amount of Each Disbursement this Period <div>2353.71</div></p> <p>PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional)

3647.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 40

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Brett Mecum

Mailing Address 2936 W Gregg Dr

City Chandler State AZ Zip Code 85224-

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10393

Date of Disbursement

09 / 30 / 2009

Amount of Each Disbursement this Period

2353.71

PAYROLL

B.

Full Name (Last, First, Middle Initial)

Premier Access Insurance Company

Mailing Address P.O. Box 659020

City Sacramento State CA Zip Code 95865-9020

Purpose of Disbursement

Employee insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10347

Date of Disbursement

09 / 01 / 2009

Amount of Each Disbursement this Period

139.53

EMPLOYEE INSURANCE

C.

Full Name (Last, First, Middle Initial)

Premier Access Insurance Company

Mailing Address P.O. Box 659020

City Sacramento State CA Zip Code 95865-9020

Purpose of Disbursement

Employee insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E10348

Date of Disbursement

09 / 22 / 2009

Amount of Each Disbursement this Period

139.53

EMPLOYEE INSURANCE

SUBTOTAL of Disbursements This Page (optional)

2632.77

TOTAL This Period (last page this line number only)

8648.38

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Arizona Republican Party

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- X Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 38 / 40
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Arizona Republican Party

NAME OF ACCOUNT
 Republican Party
 Arizona 3501 N 24th
 S

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 9 / 1 4 / 2 0 0 9

TOTAL AMOUNT TRANSFERRED

14011.78

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

14011.78

Transaction ID: H391019.C88716

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

14011.78

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

14011.78

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 39 / 40
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A. Full Name (Last, First, Middle Initial)

Matthew Roberts

Mailing Address

3501 N 24th Street

City State Zip Code

Phoenix

AZ

85016-

Purpose of Disbursement:
PayrollCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 11

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16418.89

Date

M	M
0	9

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491019.E10394

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

525.67

1351.72

1877.39

B. Full Name (Last, First, Middle Initial)

Matthew Roberts

Mailing Address

3501 N 24th Street

City State Zip Code

Phoenix

AZ

85016-

Purpose of Disbursement:
PayrollCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 11

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20775.99

Date

M	M
0	9

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491019.E10395

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

452.95

1164.72

1617.67

C. Full Name (Last, First, Middle Initial)

Michelle Schmitt

Mailing Address

3501 North 24th Street

City State Zip Code

Phoenix

AZ

85016-

Purpose of Disbursement:
Payroll less 25% federalCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 11

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

18150.57

Date

M	M
0	9

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491019.E10396

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

484.87

1246.81

1731.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1463.49

3763.25

5226.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 40 / 40
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Arizona Republican Party

A. Full Name (Last, First, Middle Initial)

Michelle Schmitt

Mailing Address

3501 North 24th Street

City State Zip Code

Phoenix

AZ

85016-

Purpose of Disbursement:
PayrollCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 11

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

22299.88

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: H491019.E10397

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

426.69

1097.20

1523.89

B. Full Name (Last, First, Middle Initial)

BMS Payroll

Mailing Address

18441 N. 25th Ave Suite 103

City State Zip Code

Phoenix

AZ

85023-

Purpose of Disbursement:
Payroll taxes less 25 % federal empCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 11

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14541.50

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	9

Transaction ID: H491019.E10398

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

303.86

781.37

1085.23

C. Full Name (Last, First, Middle Initial)

BMS Payroll

Mailing Address

18441 N. 25th Ave Suite 103

City State Zip Code

Phoenix

AZ

85023-

Purpose of Disbursement:
Payroll taxes less 25% federalCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 11

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19158.32

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: H491019.E10399

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

282.17

725.58

1007.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1012.72

2604.15

3616.87

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

2476.21

6367.40

8843.61